

SENATE BILL REPORT

SB 6282

As Reported By Senate Committee On:
Health & Long-Term Care, January 30, 2008

Title: An act relating to establishing patient-centered primary care pilot projects.

Brief Description: Establishing patient-centered primary care pilots.

Sponsors: Senators Keiser, Franklin, Kohl-Welles and Marr.

Brief History:

Committee Activity: Health & Long-Term Care: 1/23/08, 1/30/08 [DPS-WM].

SENATE COMMITTEE ON HEALTH & LONG-TERM CARE

Majority Report: That Substitute Senate Bill No. 6282 be substituted therefor, and the substitute bill do pass and be referred to Committee on Ways & Means.

Signed by Senators Keiser, Chair; Franklin, Vice Chair; Pflug, Ranking Minority Member; Carrell, Fairley, Kastama, Kohl-Welles, Marr and Parlette.

Staff: Mich'l Needham (786-7442)

Background: Recent reports indicate the number of United States medical school graduates entering family practice residencies dropped by 50 percent between 1997 and 2005. In 2006, the Washington State Department of Health reported primary care provider shortages throughout 16 of the state's 39 counties, and within specific areas or populations of 38 counties.

A new model of integrated primary care delivery systems is emerging that uses a team approach referred to as the "medical home" model of care.

Summary of Bill (Recommended Substitute): The Health Care Authority (HCA) is directed to develop a pilot project to provide funding and technical assistance to primary care providers willing to adopt a medical home model. The HCA must seek input from interested stakeholders such as the Washington Coalition for Primary Care.

The pilot program must assist adoption of the medical home model in a variety of settings throughout the state and allow for broad testing of the model. The program includes technical assistance for primary care practices to improve office workflow to assure adoption and use of the latest techniques in patient-centered integrated health care. Participating pilot sites must agree to submit valid measures using patient input and health outcome measures, reflecting measurement requirements developed by the HCA in consultation with the Puget Sound

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Health Alliance. Participation in the pilot program is limited to practices that accept Medicaid and Medicare patients.

The program must include financial incentives to attract primary care providers into primary care and may take the form of signing bonuses or other incentives. Start-up funding must be provided for adoption of health information technology models that support the medical home model. The technology assistance must be coordinated with the Washington Health Information Collaborative and Health Information Infrastructure Advisory Board. Competitive contracts may be issued for entities to provide technical assistance to the pilot sites.

The HCA must submit a report on the progress and outcomes of the pilot projects. A progress report is due by January 1, 2009, and a final report is due by December 31, 2011. The Office of Financial Management is the lead agency to coordinate a study of the supply of primary care providers, including projecting future needs for a robust primary care system with a medical home model. Findings are due by July 1, 2009. The five-year plan for changing reimbursement required by E2SSB 5930 passed in 2007, is modified and the HCA must report findings and a timeline for adoption of payment and provider performance strategies by January 1, 2009.

The bill is null and void if funding is not provided in the state budget.

EFFECT OF CHANGES MADE BY HEALTH & LONG-TERM CARE COMMITTEE: Naturopathic physicians are added to the list of primary care providers. Participation in the pilot program is limited to practices that accept Medicaid and Medicare patients.

Appropriation: None.

Fiscal Note: Requested on January 15, 2008.

Committee/Commission/Task Force Created: No.

Effective Date: Ninety days after adjournment of session in which bill is passed.

Staff Summary of Public Testimony on Original Bill: PRO: This promotes the development of the medical home model, a primary care based model that is provider and patient focused. It stresses the whole person, a longitudinal relationship, and coordinated, integrated care. Group Health has a pilot underway now in the Factoria Clinic that is demonstrating positive returns and increased provider and patient satisfaction. The bill will allow support with technology and workflow changes that will help practices be more efficient and increase capacity for patient care. The pilot makes good use of best-practices knowledge that is already available. This is especially important to rural areas, to test the model in rural practices and enhance provider recruitment and retention. It would be helpful to add naturopathic physicians to the list.

Persons Testifying: PRO: Dr. Bob Crittenden, Primary Care Coalition; Dr. Michael Somon, Group Health; Jeannie Boudrieau, ARNPs United; Dr. Martine Levine, Washington Academy of Family Physicians; Holly Detzler, Communities Connect; Dr. Douglas Lewis, Washington Association of Naturopathic Physicians; Dr. William Roes, Northwest Physicians Network.